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PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	ETH1536
	First Named Inventor	Joseph H. Contiliano, et al.
	<b>COMPLETE IF KNOWN</b>	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Attachment Of Absorbable Tissue Scaffolds To Scaffold Fixation Devices  
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International Application Number  
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

09374218 060501  
T05090 ST24860

09874213 060501  
T05090 BT242850

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
		Patented Patented Patented
I hereby appoint:		
<input checked="" type="checkbox"/> Practitioners at Customer Number <b>000027777</b>		Place Customer Number Bar Code Label Here
<b>AND</b>		
<input type="checkbox"/> Practitioner(s) named below: Name _____ Registration Number _____		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to William K. Wissing at telephone number (732) 524-6201.		
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <b>000027777</b> OR <input type="checkbox"/> Correspondence address below		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Joseph H.		Family Name or Surname Contiliano	
Inventor's Signature <i>Joseph H. Contiliano</i>		Date 06/01/2001	
Residence: City Stewartsville,	State NJ 08886	Country USA	Citizenship USA
Mailing Address 303 Aldin Road			
City Same as above	State	ZIP	Country

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Joseph John		Family Name or Surname Hammer	
Inventor's Signature <i>Joseph J. Hammer</i>		Date 06/01/2001	
Residence: City Bridgewater,	State NJ 08807	Country USA	Citizenship USA
Mailing Address 466 Country Club Road			
City Same as above	State	ZIP	Country

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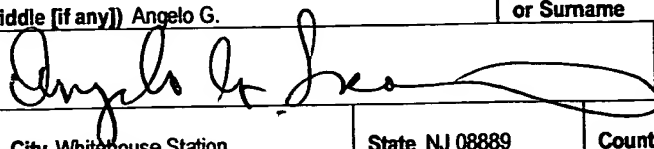
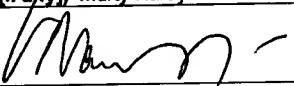
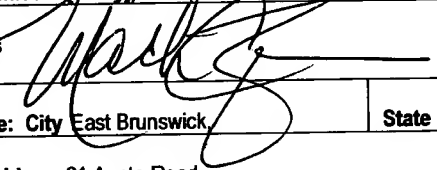
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alireza		Family Name or Surname Rezania	
Inventor's Signature <i>Alireza Rezania</i>		Date 06/01/01	
Residence: City Hillsborough,	State NJ 08844	Country USA	Citizenship Iran
Mailing Address 5 Dewitt Lane			
City Same as above	State	ZIP	Country

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NAME OF SOLE OR FORTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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00374213-060501

09374218-060501

Given Name (first and middle [if any]) Angelo G.		Family Name or Surname Scopelianos	
Inventor's Signature 		Date 6/1/01	
Residence: City Whitehouse Station,	State NJ 08889	Country USA	Citizenship USA
Mailing Address 7 John Stevens Road			
City Same as above	State	ZIP	Country
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Murty Narayan		Family Name or Surname Vyakarnam	
Inventor's Signature 		Date 06/04/01	
Residence: City New York,	State NY 10025	Country USA	Citizenship India
Mailing Address 529 West 111 Street, Apartment 42			
City Same as above	State	ZIP	Country
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Mark Charles		Family Name or Surname Zimmerman	
Inventor's Signature 		Date 6/1/01	
Residence: City East Brunswick,	State NJ 08816	Country USA	Citizenship USA
Mailing Address 21 Agate Road			
City Same as above	State	ZIP	Country